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(R	equestor's Name)	
(A	ddress)	
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PICK-UP	☐ WAIT	MAIL
(Bi	usiness Entity Nar	ne)
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(De	ocument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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COVER LETTER

TO: Amendment Section

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Division of Corporations			
SUBJECT: TRIPLE JAY, INC			
DOCUMENT NUMBER: P1100010481	6		
The enclosed Articles of Dissolution an	d fee are submitted for filin	g.	
Please return all correspondence concern	ning this matter to the follow	ving:	
SAMUEL J. CANTOR			
(Name	of Contact Person)		
SAMUEL J. CANTOR, P.A.			
(F	Firm/Company)	.	
426 S. MILITARY TRAIL			
	(Address)		
DEERFIELD BEACH, FL 33442		;	
(City/s	State and Zip Code)		
For further information concerning this r	matter, please call:		
PATRICIA KOHSMAN	at (at (
(Name of Contact Person)	(Area Code)	(Daytime Telephone Number)	
Enclosed is a check for the following am	nount:	;	
■ \$35 Filing Fee		□ \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)	
MAILING ADDRESS:		STREET ADDRESS:	
Amendment Section Division of Corporations	_	Amendment Section Division of Corporations	
P.O. Box 6327	Clifton Building		
Tallahassee. FL 32314	2661 Executive Center Circle		

Tallahassee, FL 32301

ARTICLES OF DISSOLUTION

Pursuant to section 607.1403, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

FIRST:	The name of the corporation as currently filed with the Florida Department of State: TRIPLE JAY, INC			
SECOND:	The document number of the corporation (if known):			
THIRD:	The date dissolution was authorized: 12/14/15			
	Effective date of dissolution if applicable: 12/14/15			
	(no more than 90 days after dissolution file date) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.			
FOURTH:	Adoption of Dissolution (CHECK ONE)			
	Dissolution was approved by the shareholders. The number of votes cast for dissolution was sufficient for approval.			
·	Dissolution was approved by the shareholders through voting groups.			
	The following statement must be separately provided for each voting group entitled to vote separately on the plan to dissolve:			
	The number of votes east for dissolution was sufficient for approval by			
	(voting group) (voting group)			
	Signature: (By a director, president or other officer - if directors or officers have not been selected, by			
	an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary)			
	ROBERT BLATT			
	(Typed or printed name of person signing)			
	PRESIDENT			
	(Title of person signing)			

Filing Fee: \$35

Notice of Corporate Dissolution

This notice is submitted by the dissolved corporation named below for resolution of payment of unknown claims against this corporation as provided in s. 607.1407, F.S.

This "Notice of Corporate Dissolution" is optional and is not required when filing a voluntary dissolution. Name of Corporation: TRIPLE JAY, INC. Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the Articles of Dissolution. Description of information that must be included in a claim: SPECIFIC INVOICE WITH BACK UP DOCUMENTATION. Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations) 6761 WEST INDIANTOWN ROAD, SUITE 29, JUPITER FL 33458 A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice. SAMUEL J. CANTOR Printed Name of the Person Filing Signature of the Person Filing

December 14, 2015

Department of State Division of Corporation 2661 Executive Center Circle Tallahassee, FL 32301

Re: Triple Jay, Inc. P11000104816

Dear Sirs:

Please be advised that we are filing for dissolution based on the Shareholders unanimous vote and enclosed please find the Articles of Dissolution.

Enclosures